

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**INFORMATION DISCLOSURE STATEMENT TRANSMITTAL**

In re: Stanten C. Spear, et al.  
 For: Deflectable Medical Therapy Delivery Device Having Common Lumen Profile  
 Serial No.: 10/655,980  
 Filed: September 5, 2003

**CERTIFICATE OF MAILING UNDER 37 CFR 1.8:** I hereby certify that this **INFORMATION DISCLOSURE STATEMENT** and the paper(s), as described herein, are being deposited in the U.S. Postal Service, as first class mail, addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 4th day of December, 2003.

[Signature]  
 Signature

Printed Name

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

- ☒ Information Disclosure Statement
- ☒ PTO FORM 1449
- ☒ Return Postcard

**FEE CALCULATION**

- ☒ \$ 00.00 Pursuant to 37 CFR §1.97(b) (before mailing of first Office Action)
- ☐ \$ 00.00 Pursuant to 37 CFR §1.97(c) with Certification (cited in foreign application not more than 3 months earlier)
- ☐ \$ 00.00 Pursuant to 37 CFR §1.97(e) with Certification
- ☐ \$180.00 Pursuant to 37 CFR §1.97(c) without Certification
- ☐ \$180.00 Pursuant to 37 CFR §1.97(d) with Certification

☐ Applicant hereby petitions for a \_\_\_\_\_ months' extension of time. If an additional extension of time is required, please consider this petition therefor.

☒ Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time.

☒ Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked with regard to this filing. A duplicate of this transmittal is enclosed.

December 3, 2003  
 Date

[Signature]  
 Michael C. Soldner  
 Reg. No. 41,455  
 Telephone: (763) 514-4842  
 Customer No. 27581



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Stanten C. Spear, et al. ) Art Unit: Unknown  
Serial No.: 10/655,980 ) Examiner: Unknown  
Filed: September 5, 2003 ) Docket: P-11669.00

For: DEFLECTABLE MEDICAL THERAPY DELIVERY DEVICE HAVING COMMON  
LUMEN PROFILE

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with C.F.R. §§ 1.97 *et. seq.*, the materials enclosed herewith are brought to the attention of the Examiner as possibly being of interest in connection with the above-identified patent application.

Consideration of each of the documents listed on the attached Form 1449 is respectfully requested. Pursuant to the provisions of M.P.E.P. §609, Applicant further requests that a copy of the Form 1449, marked as being considered and initialed by the Examiner, be returned with the next Official Communication.


Respectfully submitted,

Date:

December 3, 2003

By:

Michael C. Soldner  
Reg. No. 41,455  
Telephone: (763) 514-4842  
Customer No. 27581



Approved for use through 10/31/2002 OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Substitute for form 1449A/PTO

(use as many sheets as necessary)

**Complete if Known**

<b>Application Number</b>	10/655,980
<b>Filing Date</b>	September 5, 2003
<b>First Named Inventor</b>	Stanten C. Spear, et al.
<b>Group Art Unit</b>	Unknown
<b>Examiner Name</b>	Unknown
<b>Attorney Docket Number</b>	P11669.00

Sheet	1	of	1
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## U.S. PATENT DOCUMENTS

[illegible]

Substitute for form BN 1449B/PTO

(use as many sheets as necessary)

**Complete if Known**

Application Number
Filing Date
First Named Inventor
Group Art Unit
Examiner Name
Attorney Docket Number

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## FOREIGN PATENT DOCUMENTS

[illegible]

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw Line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

**Burden Hour Statement:** This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

<sup>1</sup> Unique citation designation number.

<sup>2</sup> See attached Kinds of U.S. Patent Documents.

<sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard St.3).

<sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document.

<sup>5</sup> Kind of document by the appropriate symbol as indicated on the document under WIPO Standard ST. 16 if possible.

<sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

<sup>1</sup> Unique citation designation number.

<sup>2</sup> Applicant is to place a check mark here if English language translation is attached.

